

Outside Attorney Docket No.: 11283/9

WRS Ref #: 006 US

**DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION**

As a below named inventor, I hereby declare that:

*Maarten Koning*

My residence, post office address, and citizenship are as stated below with my name.

I believe I am an original, first, and sole inventor (if only one name is listed below) or an original, first and joint inventor (if multiple names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

**TASK CONTROL BLOCK FOR A COMPUTING ENVIRONMENT**

the specification of which

☒ is attached hereto.

\_\_\_\_\_ was filed on \_\_\_\_\_ as United States Application Number \_\_\_\_\_ or PCT International Application Number \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

**PRIOR FOREIGN APPLICATION(S)**

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

APPLICATION NUMBER	COUNTRY	FILING DATE (day, month, year)	PRIORITY CLAIMED	
			Yes	No

**PRIOR UNITED STATES APPLICATION(S)**

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

APPLICATION NUMBER	FILING DATE (MM/DD/YYYY)	STATUS (i.e. Patented, Pending, Abandoned)

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER	FILING DATE (MM/DD/YYYY)	

82179105379

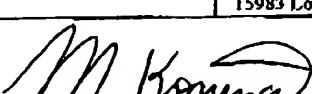
## POWER OF ATTORNEY: I hereby appoint:

Paul H. Heller (Reg. No. 21,074) and Michelle M. Carniaux (Reg. No. 36,098) of Kenyon & Kenyon, with offices located at One Broadway, New York, New York, 10004, telephone number 212-425-7200, and Folix L. D'Arienzo, Jr. (Reg. No. 27,631) and Joseph R. Palmieri (Reg. No. 40,760) of Wind River Systems, Inc., with offices located at 500 Wind River Way, Alameda, CA 94501, telephone 510-749-4100, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

## SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

**Michelle M. Carniaux**  
**KENYON & KENYON**  
**One Broadway**  
**New York, New York, 10004**  
**212-425-7200**  
**fax: 212-425-5288**

I hereby declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF SOLE INVENTOR	FAMILY NAME KONING	FIRST GIVEN NAME MAARTEN	SECOND GIVEN NAME A.
RESIDENCE & CITIZENSHIP:	CITY BLOOMFIELD	STATE OR FOREIGN COUNTRY CANADA	COUNTRY OF CITIZENSHIP CANADA
POST OFFICE ADDRESS	POST OFFICE ADDRESS 15983 Loyalist Pkwy., RR2	CITY Bloomfield	STATE & ZIP CODE/COUNTRY Ontario, Canada K0K 1G0
Signature 		Date March 7, 2000	